NORTH CAROLINA ALCOHOLIC BEVERAGE CONTROL COMMISSION

4307 Mail Service Center Raleigh, NC 27699-4307 (919) 779-0700 FAX: (919) 662-3583

LOCAL GOVERNMENT OPINION for ALCOHOLIC BEVERAGE PERMITS

APPLICANT SHOULD COMPLETE	THIS SECTION ONLY
Applicant's Name	
Corporate or LLC Name (if applicable)	
Trade Name of Business	
Former Trade Name(if any)	
Business Address	
City/State	
Date of Birth	
NC Driver's License #	
Social Security #	
, <u> </u>	
TYPE OF ABC PERMIT(s) BEING APPLI	ED FOR:
	On Premise
Indicate Type (if any)	On Frenise
	Off Premise
Indicate Type (if any)	Off Premise
Pate Form 001 Mailed or Delivered Designated Official's Name	
Title	
City/County	
Address	
Contact Telephone #	
NOTICE: The Alcoholic Beverage Control Commission sha governing body of a city or county prior to issuing a retail AB to process this form within a reasonable period of time. The a mandatory compliance with all applicable building and fire form (form 002) is for this purpose and will be completed by the	C permit. Designated Official's are expected applicant will be required to provide proof of codes. The Inspection/Zoning Compliance
FACTORS IN ISSUING A PERMIT: Pursuant to N.C. G ABC Commission shall be satisfied the applicant is a suitab place.	
PLEASE INDICATE YOUR ANSWER TO	THE FOLLOWING:
 Do you approve of the applicant? Do you approve of the location? 	YES □ NO □ YES □ NO □

OBJECTIONS: Pursuant to N.C. G.S. 18B-901(b), to be considered by the ABC Commission, the objections shall state the facts upon which it is based. If you have indicated disapproval by answering "No" to either 1 or 2, please explain your reason(s) based on fact, record, law or reputation in the space provided below. Use extra sheets if additional space is required and attach all records and/or documents used to arrive at your decision. The mere indication of "No" without an explanation is an insufficient basis for rejection and cannot be considered by the Commission.

Other factors the Commission shall consider in determining the suitability of the applicant and business are:

- 1. The reputation, character, and criminal record of the applicant.
- 2. The number of places already holding ABC permits within the neighborhood.
- 3. Parking facilities and traffic conditions in the neighborhood.
- 4. Kinds of businesses already in the neighborhood.
- Whether the establishment is located within 50 feet of a church or public school or church school.
- 6. Zoning laws.
- 7. The recommendations of the local governing body.
- Any other evidence that would tend to show whether the applicant would comply with the ABC laws and whether operation of the business at this location would be detrimental to the neighborhood.

Do you feel the applicant and/or location are unsuitable pursuant to any other factors outlined under 1-8 above? If "Yes," please write the number(s) on the space provided below and explain your reasons based on fact, record, law, or reputation. Use extra sheets if additional space is required and also attach all records and/or documents used to arrive at your decision. The mere indication of "Yes," without an explanation is an insufficient basis for rejection and will not be considered by the Commission.

-	Signature of Designated Official	Date
-	Title of Designated Official	

VERIFICATION: The Local Government Opinion Form for Alcoholic Beverage Permits (Form 001) is a basis for the Commission's rejection of an ABC application when there is an objection by local government. In addition, this form is also the basis for responsive pleadings filed when the applicant seeks judicial review of Commission action taken on behalf of local government.

If you have objected to issuance of the ABC permit(s) by this applicant at this location, you must also sign the verification below in order for the Commission to take action on your behalf. Furthermore, if the applicant seeks an administrative hearing upon rejection of his/her ABC permit(s) by the Commission, your attendance at the hearing will be mandatory in order for the Commission to proceed.

State of North	Carolina	County	
		•	Being duly sworn says that the contents of the ne to his/her own knowledge, except as to matters stated or he/she believes them to be true.
			Signature of Designated Official
Sworn to and s	subscribed bef	ore me this	
			Title of Designated Official
Day	Month	Year	

(Notary Public's Signature)